

APPLICATION TO BUILD A DRIVE OR ROAD APPROACH IN R/W

HCHD Form 1014

Revised 3/20/01

Hamilton County Highway Department 1700 S. 10th Street Noblesville, IN. 46060 Ph: (317) 773-7770 Fax: (317) 776-9814

Permit #:

- Instructions:

 Form must be completely filled out using a typewriter or printed using black ink. Any non-applicable blanks must be marked N/A.
 Contact a Permit Inspector or consult the Hamilton County "Permit Manual for County Roads" for questions concerning this application.
 Engineered plan must accompany this application. The drawing must show the R/W, edge of road shoulders, all construction details, existing driveways, existing drainage, easements and other significant features within or immediately adjacent to the R/W. The plan must show distances to the nearest intersecting roads, dimensions of all construction and have a legend for all symbols used. Failure to include all of the above will result in the denial and return of your application.

 The permit bond amount is based on the type and amount of work being authorized by this permit. Contact a Permit Inspector or the "Permit Manual for County Roads" for a specific amount. The beneficiary on the permit bond shall be the "Board of Hamilton County Commissioners, Hamilton County, Indiana".

5	Permit fee shall be check or money order made payable to the "Ham this signed application, along with the permit fee, permit bond and en	ilton Cour	nty Treasure	r" Cas	h can not be accented	When comp	ata mail or hand daliyar
	Commercial Drive				drive(s) @ 5	\$300 each	=
	Construction/Temporary Drive	red.)			drive(s) @ \$	550 each	
	Public Road Approach/Private Road Approach (Includes decel and accel lane. Does not include passing blisters.)				drive(s) @ \$400 each =		
	Utility Pull-Off Drive				drive(s) @ \$100 each =		
For Residential Drives or Farm Field Entrances use HCHD Form 1015.							
Check or money order #: TOTAL PERMIT FEE							
	Company:		Bond Amou			id #:	
Appli				- 1	Applicant's Internal Con	1	Applicant's Status
Maili	ng Address						(Must mark one)
Individual							
City State Zip Code							☐ Partnership
Contact Person Phone # Fax #							
Proje	A Constant of the Constant of						
						Phone #	
Proje	ct Owner's Address (If different from applicant)					Fax#	
City							
Project Location (Must be described in reference to centerlines of streets in feet. Use HCHD Form 1021 for additional locations in same project.)							
Project Purpose							
I hereby certify that I have the authority to bind the above named applicant and the owner of the facilities being installed under this permit to the terms, conditions and requirements of this permit. I have received a copy of the code, read and fully understand all requirements of Hamilton County Code Title 8, Article 17, Chapter 3, Section 2 concerning the permit and construction process and requirements. I also certify that I, the applicant and all persons performing the work authorized by this permit understand all requirements of the above referenced code and permit and will abide by all of their requirements and conditions. I further certify that I, the applicant and any persons performing work authorized by this permit will not make any changes in work from the approved plan and permit without receiving written permission from the Hamilton County Highway Department. The applicant and owner agrees and understands that Hamilton County does not warrant the accuracy of the limits of the right of way shown on this permit and further that Hamilton County's approval is limited to conveying it's approval to install the approved facilities only within legal road right of ways. If the facilities as shown on this permit are not within legal road right of ways, it shall be the applicant's duty to obtain the proper legal access to the property to install said facilities as shown on the plans. The applicant, owner and I agree to pay all attorney's fees, court costs and other damages or costs incurred by Hamilton County in enforcing the terms of this permit, enforcing the County Code or which are a result of litigation incurred by the County as a result of this permit. The applicant, the owner of the facilities being installed under this permit and I understand that in the event Hamilton County determines that any of the facilities installed under this permit need to be repaired, relocated or removed from the rights-of-way, that the owner or any subsequent owner of the facilities agrees to maintain, relocate or remove							
Signa	ure					ent,	
Printe	d Name		Title				
Do Not Write In this Section - Surveyor's Office Use Only ☐ This project does not affect a regulated drain. ☐ This project affects the following regulated drain(s) and an application must be made with the Hamilton County Drainage Board for construction within a drainage easement.							
Surveyor, Hamilton County: Date Approved:							
Do Not Write In this Section - Highway Department Use Only							
Inspector: Date: This Permit Is Approved: Other: As submitted Other: Subject to the attached conditions Subject to the changes noted on the plans.							
	s. Dev. Engr.:		Date:				
			_ :				